**10350 & 13886 Final Summative Assessment**

**NQF 2 Contact Centre Support ID 71490 LP 73269**

|  |  |
| --- | --- |
| **Name:**  |  |
| **ID Number:**  |  |
| **Workplace:**  |  |
| **Region:**  |  |
| **Date:**  |  |
| **Signature (to verify this is my own work)**  |  |

# Activity 1: Knowledge Questionnaire

Read the following knowledge questions carefully and write your answer in the space provided. The mark allocation will provide an indication of how comprehensive your answer should be e.g. select more than one answer….

**Number Question Marks**

1. Brainstorming is a key element in the problem solving process. What is its main 1 benefit?

A; It can generate fresh, unusual approaches to a problem

B; It makes for exciting meetings as people bounce ideas off each other

C; It encourages team members to talk.

1. Brainstorming is a key element n the problem solving process. What is its main 4 benefit?

A; Think creatively 1 Use techniques such as the mindmap

B; Analyse the problem 2 Be careful to gather the facts, not

 Opinions

C; Collect data 3 Use techniques such as Pareto charts and histogram

E; Interpret data 4 Try to identify the core issue F; Define the problem

1. Which four (4) of the following should you do as you attempt to solve a problem 4 in your workplace?

A; Aim to make everyone happy with the outcome

B; Focus on goals

C; Avoid making assumptions about aspects of the problem

D; Keep your opinions of people fixed

E; Try not to blame others for the problem

F; Aim for win-lose situations

1. Select three (3) implications for an agent of having a customer relationship 3 management strategy in place.

A; He won’t be expected to show the same level of respect to low-priority customers as he does to high-value customers.

B; He may be expected to work out the value of customers as he handles their calls

C; His performance measures may be adjusted to allow for longer talk times with high-value customers

D; He will need to be consistent when communicating with high-value customers regardless of the mode of communication used.

E; The procedures for his department may be altered to help him assist highvalue customers



1. Having a customer relationship management strategy in place has implications 3 that could affect your job as an agent. Three (3) of the four (4) areas below could be affected. Match each of these with the right implication.

A; Technology 1 Performance measures may need to be adjusted to allow for longer talk times B; Facility 2 Call scripts may need to be revised to help agents assist high-value customers C; People 3 A database may need to be assembled to identify high-value customers

D; Process

1. Mark, a teamleader, is explaining to his team some of the implications of having 4 customer relationship management in place. Select four (4) of these implications from the list below:

A; “You’ll need to know how to determine how valuable a customer is while handling his call.”

B; “You may require training in written skills to communicate with high-value customers by fax or the internet.”

C; “Your performance targets may be revised to allow for longer talk times.”

D; “We might have to assemble a new database of information about new and existing customers.”

E; “You may possibly have to agree to anything a high-value customer wants.”

F; “You might have to record new information about high-value customers.”



1. Hailey is a customer service representative who is trying to improve her listening 5 skills. Which five (5) of the following rules should she follow?

A; Summarise all the important facts and ideas

B; Take detailed notes throughout the call

C; Argue with the customer if she feels that he is wrong D; See things from the customer’s point of view

E; make acknowledging comments to show her interest

F; Analyse what the customer says

G; pay full attention to what the customer says

1. Which of the following statements is correct? Customers are satisfied when: 1

A; They buy a good product even if the customer service is poor

B; They buy a good product and receive good customer service

C; They receive good customer service even if the product they buy does not match their expectations.


## TOTAL: 25

Competence Rating:

The candidate must obtain an overall percentage of 75% to be declared competent.

# Activity 2: Practical Component

2.1 You are required to demonstrate the following naturally occurring evidence from your workplace:

* Evidence where you have contributed to solving a **workplace problem** (this could be emails, minutes of meetings, witness statements signed by your coach).
* Evidence that a problem was successfully resolved with a customer and or your team – you may have many opportunities to collect such evidence so take your time in analysing what the most appropriate situation would be to include as evidence for this unit standard.

 2.2 You are required to compile a SWOT analysis for your workplace. Select a current issue that is posing a problem and complete the SWOT table with your findings. Make sure you consult with others and explain how you went about completing each step.

|  |  |
| --- | --- |
| **Issue/Problem:**  |   |

|  |  |
| --- | --- |
| **Section**  | **Approach used:**  |
| Strength    |   |
| Weakness    |   |
| Opportunity    |   |
| Threat    |   |

|  |  |
| --- | --- |
| **S**  | **W**  |
| **O**  | **T**  |

# Activity 3: US 10350 Workplace Observation Sign Off

You are required to be observed in handling data and the computer system for at least **four customer interactions/calls**. Your workplace coach or QA supervisor will need to observe this and complete the following checklist for each interaction.

Where possible, you are encouraged to **include any naturally occurring evidence that meets the outcomes** for at least one observation and all evidence must be signed by yourself and your workplace coach.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in my capacity as workplace coach), I confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has achieved/not achieved the following outcomes:

|  |  |
| --- | --- |
| **Observation Number:**  | 1  |
| **Date of Observation:**  |   |
| **Time of Observation:**  |   |
| **Call Reference Number:**  |   |
| **Observation Conducted by (Signature):**  |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessment Criteria**  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
| **Knowledge of company computer packages is demonstrated (US10349 as EEK)**  |
| Knowledge and understanding of company specific computer packages is demonstrated and applied during a customer interaction correctly, accurately and successfully Learner shows self confidence in using company specific packages  |   |   |   |
| **Information is offered and elicited from and to a customer during an interaction (10350 SO1 & SO2)**  |
| Information elicited from customers is accurate and in accordance with what customer's requirements are The information is obtained and responses offered within the set company specific timeframe and in the correct format/requirement. Learner is able to present information logically and clearly  |   |   |  |
| **Information is recorded correctly (10350 SO3)**  |
| Information is recorded within company specific timeframes  |   |   |  |
| **Assessment Criteria**  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
| Information recorded is relevant and consistent with company specific formats and requirements  |  |  |  |
| **Escalation procedures are correctly demonstrated (10350 SO4)**  |  |  |
| Learner correctly identifies an escalation situation The escalations is conducted correctly according to company specific procedures and guidelines The customer is informed of the escalation of their specific requirements and is communicated about timeframes of how and when the escalation and feedback will occur  |   |   |  |
|  | **Learner’s feedback or response to workplace coach comments. What can I improve on:**  |         |  |  |  |
| **Supporting evidence referenced (if any):**  |       |  |  |
| **Learner Signature:**  |   |  |  |

**Assessor Sign Off:**

|  |  |
| --- | --- |
| **Date of Observation:**  |    |
| **Time of Observation:**  |    |
| **Call Reference Number:**  |   |
| **Comments/Feedback:**  |   |

**ASSESSEMNT DECISION:**

|  |  |
| --- | --- |
| **Competent**  | **Not yet competent**  |
| **Assessor Sign:**  | **Moderator Sign:**  |
|  |  |
| **Re-assessed**  | **Final Outcome**  |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in my capacity as workplace coach), I confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has achieved/not achieved the following outcomes:

|  |  |
| --- | --- |
| **Observation Number:**  | 2  |
| **Date of Observation:**  |   |
| **Time of Observation:**  |   |
| **Call Reference Number:**  |   |
| **Observation Conducted by (Signature):**  |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessment Criteria**  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
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| Information elicited from customers is accurate and in accordance with what customer's requirements are The information is obtained and responses offered within the set company specific timeframe and in the correct format/requirement. Learner is able to present information logically and clearly  |   |   |  |
| **Information is recorded correctly (10350 SO3)**  |
| Information is recorded within company specific timeframes Information recorded is relevant and consistent with company specific formats and requirements  |   |   |  |
| **Escalation procedures are correctly demonstrated (10350 SO4)**  |
| Learner correctly identifies an escalation situation The escalations is conducted correctly according to company specific procedures and guidelines  |   |   |  |
| **Assessment Criteria**  |  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
| The customer is informed of the esca requirements and is communicated a and when the escalation and feedbac | lation of their specific bout timeframes of how k will occur  |  |  |  |
|  | **Learner’s feedback or response to workplace coach comments. What can I improve on:**  |          |  |  |  |
| **Supporting evidence referenced (if any):**  |       |  |  |
| **Learner Signature:**  |   |  |  |

**Assessor Sign Off:**

|  |  |
| --- | --- |
| **Date of Observation:**  |    |
| **Time of Observation:**  |    |
| **Call Reference Number:**  |   |
| **Comments/Feedback:**  |   |

**ASSESSEMNT DECISION:**

|  |  |
| --- | --- |
| **Competent**  | **Not yet competent**  |
| **Assessor Sign:**  | **Moderator Sign:**  |
|  |  |
| **Re-assessed**  | **Final Outcome**  |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in my capacity as workplace coach), I confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has achieved/not achieved the following outcomes:

|  |  |
| --- | --- |
| **Observation Number:**  | 3  |
| **Date of Observation:**  |   |
| **Time of Observation:**  |   |
| **Call Reference Number:**  |   |
| **Observation Conducted by (Signature):**  |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessment Criteria**  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
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| **Information is recorded correctly (10350 SO3)**  |
| Information is recorded within company specific timeframes Information recorded is relevant and consistent with company specific formats and requirements  |   |   |  |
| **Escalation procedures are correctly demonstrated (10350 SO4)**  |
| Learner correctly identifies an escalation situation The escalations is conducted correctly according to company specific procedures and guidelines  |   |   |  |
| **Assessment Criteria**  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
| The customer is informed of the escalation of their specific requirements and is communicated about timeframes of how and when the escalation and feedback will occur  |  |  |  |

|  |  |
| --- | --- |
| **Learner’s feedback or response to workplace coach comments. What can I improve on:**  |          |
| **Supporting evidence referenced (if any):**  |       |
| **Learner Signature:**  |   |

**Assessor Sign Off:**

|  |  |
| --- | --- |
| **Date of Observation:**  |    |
| **Time of Observation:**  |    |
| **Call Reference Number:**  |   |
| **Comments/Feedback:**  |   |

**ASSESSEMNT DECISION:**

|  |  |
| --- | --- |
| **Competent**  | **Not yet competent**  |
| **Assessor Sign:**  | **Moderator Sign:**  |
|  |  |
| **Re-assessed**  | **Final Outcome**  |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in my capacity as workplace coach), I confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has achieved/not achieved the following outcomes:

|  |  |
| --- | --- |
| **Observation Number:**  | 4  |
| **Date of Observation:**  |   |
| **Time of Observation:**  |   |
| **Call Reference Number:**  |   |
| **Observation Conducted by (Signature):**  |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessment Criteria**  | **Coach** **Signature** **(initials)**  | **Outcome &** **Criteria Met?** {Y/N}  | **Comments – please include** **DETAILED COMMENTS as** **feedback to the learner (for praise/improvement)**  |
| **Knowledge of company computer packages is demonstrated (US10349 as EEK)**  |
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|  |  |
| --- | --- |
| **Learner’s feedback or response to workplace coach comments. What can I improve on:**  |          |
| **Supporting evidence referenced (if any):**  |       |
| **Learner Signature:**  |   |

**Assessor Sign Off:**

|  |  |
| --- | --- |
| **Date of Observation:**  |    |
| **Time of Observation:**  |    |
| **Call Reference Number:**  |   |
| **Comments/Feedback:**  |   |

**ASSESSEMNT DECISION:**

|  |  |
| --- | --- |
| **Competent**  | **Not yet competent**  |
| **Assessor Sign:**  | **Moderator Sign:**  |
|  |  |
| **Re-assessed**  | **Final Outcome**  |